

MINNESOTA BOARD OF ARCHITECTURE, ENGINEERING, LAND SURVEYING,
LANDSCAPE ARCHITECTURE, GEOSCIENCE AND INTERIOR DESIGN

85 East 7th Place, Suite 160, St. Paul, MN 55101-2113
Phone: 651-296-2388 • Fax: 651-297-5310 • mn.gov/aelslagid

**APPLICATION FOR PRINCIPLES AND PRACTICE OF
ENGINEERING (PE) EXAM**

(AND STRUCTURAL EXAM)

INSTRUCTIONS

Application Packet Contents

Instructions and Notices.....Instr-1 – Instr-4

Required Forms

[PE Exam Application](#)..... 1 – 5

[Employment History and Experience Form](#).....EHE 1 – 3

Optional Forms

Read the instructions to determine which (if any) of the forms below you might need.

- [FE Waiver Request](#)
- [Verification of Examination and/or Licensure](#)
- [Authorization to Release Applicant Information](#)

Key Information

- Application deadlines are posted on the Board's website. **It is your responsibility** to complete forms and have third parties forward any documents noted in the instructions by those deadlines. **All** required forms and documents must be received **prior to Board consideration of your application**. You'll be informed by letter once it is reviewed.
- Please read the education and experience requirements ([MN Rule 1800.2500 Subp. 2a](#)) prior to submitting an application.
- If any of your records are under a different name, include with your application a copy of your marriage license, divorce decree or legal name change document.
- Please allow 3 weeks from mailing your application before inquiring about its status.
- If your application is approved by the Board, an examination fee will be required when registering with NCEES. **Do NOT register with NCEES prior to Board approval** or you may forfeit your exam registration fee. Once you receive Board approval, it is your responsibility to register with NCEES.
- Upon passage of the PE Exam, you will receive a letter of instruction with application and fee information for obtaining your professional license.

Application Steps

1. Complete all parts of the application form (pages 1-5).
2. Complete the "Applicant" portion of the [Employment History and Experience Form](#) and send to your supervisor(s) for completion. See that form for detailed instructions.
3. If you did NOT receive your Engineering-in-Training Certificate **from Minnesota**, you must
 - request final official transcripts for all degrees earned. The transcript must show the degree(s) awarded and the date(s) of graduation. **Do not open the transcript record**. Forward it as sealed by the institution or have it mailed directly to us.

AND

 - request verification of having passed the Fundamentals of Engineering Exam. Go to verify.ncees.org to request that electronic verification be sent to Minnesota. If the state where you took the exam is not yet participating in electronic verification, complete the [Verification of Exams and Current Licensure Form](#). Send that form to your state, along with any fee they may require*, and a stamped enveloped addressed to the Minnesota Board (see address above).

* Some states charge a fee for verification of your records. To avoid delay in processing your request, you may wish to contact your state to determine if there is a fee or any additional instructions.
4. **Mail the application (pages 1-5), the exam application fee of \$75.00, and any required supporting documents to the address above.** Make your check payable to **MN Board of AELSLAGID**. The application fee is nonrefundable and cannot be applied toward future exams.

**If you have questions regarding your application,
please call the Board office at 651-296-2388.**

Data Practices Act Warning

The data you furnish on this form will be used by the Board to process your application for licensure. You are not legally required to provide this data; however, if you fail to do so, the Board may be unable to issue your license. Until licensure is granted all application data, except name and designated address, are private data pursuant to Minnesota Statutes section 13.41, subdivision 2 (2014). All data, except social security number and email address become public record when licensure is granted pursuant to Minnesota Statutes section 13.41, subdivision 5 (2014).

The following checklist is provided as a optional tool to assist you in verifying that you have completed / requested all items needed. Do not include the checklist with your application; it is for your reference only.

October 2016 PE Exam Application Deadline: **August 16, 2016**

If you have **never applied to the MN Board for the PE Exam or if you last applied more than 3 years ago:**

Application Form - **All** pages (1-5) are completed.
My signature on the affidavit (page 5) is notarized.
Rules of Professional Conduct (page 4) is signed and dated.
Employment History and Experience Verification.

I prepared and sent the Employment History and Experience Form to everyone listed in Part E: Record of Employment History.

I included the instruction page along with the form.
AND

I listed a "postmarked by" (due) date in the field provided.
AND

I followed up by the "postmarked by" date with my supervisor(s) to confirm that they completed and returned the form to the MN Board.

Transcripts

I received my EIT Certificate from MN Board and have earned no new degree; no need to send transcripts.
OR

I did **not** receive my EIT from MN or have new degree.

I have requested transcripts for all undergrad and graduate degrees not already sent to MN Board.
AND

I read the information in the Instructions (page Instr-3) regarding Education Evaluation Guidelines and if my education needs to be evaluated I have contacted one of the vendors listed on that page.

FE Exam verification. Either:

I took my FE in MN; they already have my exam results.
OR

I used verify.ncees.org to request my FE Exam results be sent to Minnesota electronically.
OR

I prepared and sent the Verification of Exams and Current Licensure Form to the state that has my FE and/or license information, after first contacting them to determine if I need to enclose a fee or follow any other instructions they might have.
OR

I have followed the instructions on the Request for Waiver from FE Exam Form and have enclosed that form with my PE application.

I have made a **copy** of my completed application and all documents I am sending to the Board **for my own records**.

I have a check or money order for **\$75** made payable to **MN Board of AELSLAGID**.

I have mailed the application, fee, and any supporting documents to the MN Board by the application deadline.

If you have **previously applied to the MN Board for the PE Exam within the last 3 years:**

Application Form - Pages 1 and 3-5 only are completed (page 2 does not need to be resubmitted).

For Part E Record of Employment History, I provided an UPDATED history for **the time between what I listed on my previous application and the present** (I don't need to repeat history I already provided).

My signature on the affidavit (page 5) is notarized.

Rules of Professional Conduct (page 4) is signed and dated.

UPDATED Employment History and Experience Verification.

I prepared and sent the Employment History and Experience Form to everyone listed in Part E: Record of Employment History. Even if the supervisor listed previously completed this form, I am requesting again, since the form includes additional hours and new work experience that supervisor must verified.

I included the instruction page along with the form.
AND

I listed a "postmarked by" (due) date in the field provided.
AND

I followed up by the "postmarked by" date with my supervisor(s) to confirm that they completed and returned the form to the MN Board.

IF I failed the PE Exam 3 or more times, I am enclosing documents/evidence that I have improved my education or experience qualifications as required by MN Rule 1800.0900 Subp.4.

I have made a **copy** of my completed application and all documents I am sending to the Board **for my own records**.

I have a check or money order for **\$75** made payable to **MN Board of AELSLAGID**.

I have mailed the application, fee, and any supporting documents to the MN Board by the application deadline.

Mail your application, fee and supporting documents postmarked no later than the application deadline to:

Minnesota Board of AELSLAGID
85 East 7th Place, Suite 160
St. Paul, MN 55101

NOTICE REGARDING SPECIAL ACCOMMODATIONS

Information regarding accommodation requests under the **American with Disabilities Act (ADA)** or requests based on **religious beliefs and practices** is posted on the NCEES website, www.ncees.org, under Special Testing Accommodations. Check the website for request deadlines. No deadline extensions and no exceptions allowed.

A BRIEF SUMMARY OF YOUR RIGHTS UNDER THE AMERICANS WITH DISABILITIES ACT

INTRODUCTION

The Americans with Disabilities Act (“ADA”) covers “public entities.” The Board is a “public entity” covered by the ADA. The Board may not refuse to allow a person with a disability to take the examination simply because the person has a disability. It must permit persons with disabilities to take the examination in an integrated setting unless separate or different measures are necessary to ensure equal opportunity. It must eliminate unnecessary eligibility standards or rules that deny individuals with disabilities an equal opportunity to take the examination.

WHO IS COVERED?

The ADA provides comprehensive civil rights protection for “qualified individuals with disabilities.” An “individual with a disability” is a person who: 1) has a physical or mental impairment that substantially limits a “major life activity,” 2) has a record of such an impairment, or 3) is regarded as having such an impairment. “Major life activities” include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. Individuals who currently engage in the illegal use of drugs are not protected by the ADA when an action is taken on the basis of their current illegal use of drugs.

A “qualified” individual with a disability is one who meets the essential eligibility requirements for the examination. The Board is not required to take any action that would result in a fundamental alteration in the nature of the examination or an undue financial and administrative burden. However, the Board must take any other action, if available, that would not result in a fundamental alteration or undue burdens but would ensure that individuals with disabilities receive the benefits or services.

WHAT IS REQUIRED?

The Board is required to make reasonable modifications in any policies, practices, and procedures that deny equal access to individuals with disabilities, unless a fundamental alteration in the examination would result. To do so, it must furnish auxiliary aids and services when necessary to ensure effective communication, unless an undue burden or fundamental alteration would result. The Board may not place special charges on individuals with disabilities to cover the costs of measures necessary to ensure nondiscriminatory treatment, such as making modifications required to provide program accessibility or providing qualified interpreters. Finally, it must operate the examination so that, when viewed in its entirety, it is readily accessible to and usable by individuals with disabilities.

Integration of individuals with disabilities into the mainstream of society is fundamental to the purposes of the ADA. The Board may not provide the examination to individuals with disabilities through programs that are separate or different, unless the separate programs are necessary to ensure that the benefits and services are equally effective. Even when separate programs are permitted, an individual with a disability still has the right to choose to participate in the regular program. The Board cannot require an individual with a disability to accept a special accommodation or benefit if the individual chooses not to accept it.

QUESTIONS?

If you have any questions about the ADA we encourage you to call the United States Department of Justice, which has an ADA information line, at (202) 514-0301 (voice) or (202) 514-0381/0383 (TDD). These telephone numbers are not toll-free numbers.

EDUCATION EVALUATION GUIDELINES

FOREIGN EDUCATION:

Applicants who have been educated outside the United States and whose engineering program is not recognized under the Washington Accord** must have their degree(s) evaluated. Education will only be accepted if it is determined to be equivalent to an Engineering Accreditation Commission (EAC)/ABET-accredited bachelor degree.

** See the [International Engineering Alliance website](http://www.ncees.org) for the list of accredited programs under the Washington Accord.

DOMESTIC EDUCATION:

Applicants who have been educated in the United States, **but their degree program is not EAC/ABET accredited**, must have their degree evaluated in order to determine if their degree program meets the minimum requirements for engineering science and engineering design credits.

CONTACT ONE OF THE FOLLOWING COMPANIES TO OBTAIN AN EDUCATION EVALUATION REPORT:

Foreign or US Degrees/Transcripts:

NCEES Credentials Evaluations
P.O. Box 1686
Clemson, SC 29633
Phone: (800) 250-3196
Website: www.NCEES.org

Foreign Degrees/Transcripts only:

Educational Credential Evaluators (ECE)
P.O. Box 514070
Milwaukee, WI 53203-3470
Phone: (414) 289-3400
Website: www.ece.org

Request from the company a **SUBJECT ANALYSIS EVALUATION**. This is the evaluation type **required** to determine if the degree meets the minimum requirements of engineering science and engineering design (see [MN Rule 1800.2500 Subp2a](#)).

The original evaluation report must be sent directly from the evaluation service to the Minnesota Board office either by US mail or electronically. No copies will be accepted.

PE EXAM SCHEDULE BY DISCIPLINE

Examination specifications (content and format) for the various engineering disciplines for the Principles and Practice of Engineering Examination are available from NCEES www.ncees.org.

DISCIPLINE	EXAM MONTH	
	April	Oct
Agricultural and Biological	x	
Architectural	x	
Chemical	x	x
Civil	x	x
Control Systems		x
Electrical and Computer	x	x
Environmental	x	x
Fire Protection		x
Industrial	x	
Mechanical	x	x
Metallurgical and Materials		x
Mining and Mineral Processing		x
Naval Architectural and Marine	x	
Nuclear		x
Petroleum		x
Software Engineering	x	
Structural – Lateral Forces	x	x
Structural – Vertical Forces	x	x

STUDY MATERIALS/ REFRESHER COURSES

For those seeking such materials, the National Council of Examiners for Engineering and Surveying (NCEES) has prepared study guides for the Principles and Practice of Engineering Examination. To order, contact NCEES at:

National Council of Examiners for Engineering and Surveying
P.O. Box 1686, Clemson, SC 29633-1686
Phone: 864-654-6824 | Toll-free: 800-250-3196
Fax: 864-654-6966 | Website: www.ncees.org

For information regarding refresher courses, contact:

Minnesota Society of Professional Engineers
20 E. Thompson Ave. #206, West St. Paul, MN 55118
Phone: 651-457-2347
Email: info@mnspe.org | Website: www.mnspe.org

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FOR BOARD USE ONLY	
Application #	

OCTOBER 2016 EXAMINATION

Application Deadline: August 16, 2016
Application Fee: \$75

FOR BOARD USE ONLY	
License #	
Date License Issued	
License Fee	
\$	

Part A: Applicant Information (All fields are required.)

1. Are you or your spouse an active duty military member? Or have you left service in the last two years with an honorable or general discharge? No Yes (Priority processing)

2. The address below is my (check one): Home Business. If **business**, list name: _____

3. General/contact information:

Name _____ SS # _____
(First) (Middle) (Last) (Suffix) (Or Passport or Visa #, if no Social Security #)

Former Name _____ Gender: ☐ Male ☐ Female
(If applicable)

Street Address _____ Birth Date _____
(No PO boxes) (MM) (DD) (YYYY)

City _____ State/Province _____

Zip/Postal Code _____ Country _____ Phone # _____

4. Have you ever had a professional license disciplined, denied, surrendered, suspended or revoked? If **yes**, provide a statement of explanation on a separate sheet of paper. Yes No

Part B: Examination Application Information

1. For which discipline and subdiscipline of the PE/SE exam are you applying?

2. Read the items below and check the box that matches your situation.

I am a first-time applicant to the MN Board for the PE Exam.

I previously sat for the PE Exam in Minnesota and passed in the following discipline: _____.

I previously applied for the PE Exam in Minnesota and was approved but never took it.

I previously applied in Minnesota and was denied. I have fulfilled additional requirements.

I previously sat for the NCEES PE Exam and failed **less than 3 times**. State(s) where I sat:

I previously sat for the NCEES PE Exam and failed **3 or more times**. State(s) where I sat: _____.

Part C: Record of Examination(s) and Licensure

Applicant Name: _____

1. Have you taken and passed the NCEES Fundamentals of Engineering (FE) Exam? Yes No

If **no**, and you are requesting a waiver, complete the [FE Exam Waiver Form](#).

If **yes**, provide the information below:

State Where You Passed FE Exam	Engineer-in-Training (EIT) #	Month and Year Issued	Number of Exam Hours	Were you granted a waiver of the FE Exam?
				Yes No

2. Do you currently hold a license in Minnesota? Yes No

If **yes**, list profession: _____ and license # _____.

3. List all states (other than Minnesota) or countries in which you hold an architect, professional engineer, land surveyor, landscape architect, professional geologist or professional soil science license. Attach a sheet if needed.

WHERE LICENSED	DATA PERTAINING TO LICENSE(S)				CHECK METHOD FOR EACH LICENSE			
	Profession (For Engineering, Include Discipline)	License #	Date Issued (mm/yyyy)	Is License Current?	Written Exam—List Number of Hours:	Oral Exam	Exemption (Grandfather Clause)	Comity
				Yes No				
				Yes No				
				Yes No				
				Yes No				
				Yes No				

Part D: Education

1. List all undergraduate and graduate degrees. **You must submit an official transcript** from each educational institution. Transcripts must arrive in a sealed envelope from the institution.

College/University Attended	City, State, Country	Date Graduated (mm/yyyy)	Degree Received

2. If none of the degrees above are from an EAC-ABET-accredited institution, are you submitting the required degree evaluation ([see page Instr-4](#))? Yes No N/A

Part E: Record of Employment History (Qualifying Experience)

Applicant Name: _____

Note: Qualifying experience is calculated up to the day you submit your application—**NOT** the PE Exam date.

1. List your supervisor(s), their profession and their company name and address. Account for all the time from the receipt of your degree(s) to the present. Also include any intern or co-op experience prior to graduation, if you are using that time to meet the minimum experience requirement. Attach additional sheets if necessary.

The Board will review the total hours and type of work experience verified by your supervisors to determine if you meet [MN Rule 1800.2805](#):

Qualifying Experience Defined. As used in this part and parts [1800.2600](#), [1800.2700](#), and [1800.2800](#), qualifying experience consists of varied, progressive, nonrepetitive, practical experience at engineering work, developing the ability to apply the theoretical knowledge gained during academic training in making sound judgments in solving engineering problems. The varied experience must include increments of design, planning, technical specifications, codes and standards, research and analysis, engineering economics, safety, observation and inspection of construction of products. Experience shall be written in detail and submitted with the application for evaluation and approval by the Board.

Supervisor Name (List in Chronological Order)	Business Name & Address	Employment Dates Under Supervisor	Profession (If Engineering, Include the Discipline)

2. Provide a partially completed [Employment History and Experience Form](#) (see [form](#) for instructions) to **all the supervisors listed above**.

Part F: Rules of Professional Conduct (MN Rules 1805.0100-1805.0900)

Read below, then **sign** and **date**. Keep a copy of this document for your records.

1805.0100 PROFESSIONAL CONDUCT.

Subpart 1. Purpose. This rule of professional conduct is adopted for the purpose of implementing the laws and rules governing the practice of architecture, engineering, land surveying, landscape architecture, and geoscience including Minnesota Statutes, section 326.11.

Subp. 2. Scope. This rule is applicable to and binding upon each person, corporation, or partnership subject to the regulatory jurisdiction of the board and each person subject to the control of the licensee.

Subp. 3. Imputed knowledge of professional responsibility. Each licensee who holds a certificate of licensure issued by the board is charged with knowledge of this rule. In the exercise of the privileges and rights granted by the certificate of licensure, the licensee shall conform professional conduct to the public and to the board in accordance with the provisions of this rule, and shall, as a condition of licensure, subscribe to and agree to conduct the practice in accordance with the provisions of this rule.

1805.0200 PERSONAL CONDUCT.

Subpart 1. Public confidence and personal integrity. A licensee shall avoid any act which may diminish public confidence in the profession and shall, at all times, conduct himself or herself, in all relations with clients and the public, so as to maintain its reputation for professional integrity.

Subp. 2. False statements and nondisclosure. A licensee shall not submit a materially false statement or fail to disclose a material fact requested in connection with the application for certification or licensure in this state or any other state.

Subp. 3. Knowledge of unqualified applicants. A licensee shall not further the application for certification or licensure of another person known by the licensee to be unqualified in respect to character, education, or other relevant factor.

Subp. 4. General prohibitions. A licensee shall not:

- A. circumvent a rule of professional conduct through actions of another;
- B. engage in illegal conduct involving moral turpitude;
- C. engage in conduct involving dishonesty, fraud, deceit, or misrepresentation;
- D. engage in conduct that adversely reflects on the licensee's fitness to practice the profession; or
- E. permit the licensee's name or seal to be affixed to plans, specifications, or other documents which were not prepared by or under the direct supervision of the licensee.

Printed Name _____

Date _____

Signature _____

1805.0300 CONFLICT OF INTEREST.

Subpart 1. Employment. A licensee shall avoid accepting a commission where duty to the client or the public would conflict with the personal interest of the licensee or the interest of another client. Prior to accepting such employment the licensee shall disclose to a prospective client such facts as may give rise to a conflict of interest.

Subp. 2. Compensation. A licensee shall not accept compensation for services relating or pertaining to the same project from more than one party unless there is a unity of interest between or among the parties to the project and unless the licensee makes full disclosure and obtains the express consent of all parties from whom compensation will be received.

Subp. 3. Gifts. A licensee shall not, directly or indirectly, solicit or accept any compensation, gratuity, or item of value from contractors, their agents, or other persons dealing with the client or employer in connection with the work for which the licensee has been retained without the knowledge and approval of the client or the employer.

1805.0400 IMPROPER SOLICITATION OF EMPLOYMENT

A licensee shall seek and engage in only the professional work or employment the professional is competent and qualified to perform by reason of education, training, or experience.

A licensee shall not falsify or misrepresent the extent of the licensee's education, training, experience, or qualifications to any person or to the public; nor misrepresent the extent of the licensee's responsibility in connection with any prior employment.

A licensee shall not transmit, distribute, or publish or allow to be transmitted, distributed, or published, any false or misleading information regarding the licensee's own qualifications, training, or experience or that of his or her employer, employees, associates, or joint venturers.

A licensee shall not tender any gift, pay, or offer to pay, directly or indirectly, anything of substantial value, whether in the form of a commission or otherwise, as an inducement to secure employment. A licensee is not prohibited from paying a commission to a licensed employment agency for securing a salaried position.

1805.0500 FALSE OR MALICIOUS STATEMENTS.

A licensee shall make no false or malicious statements which may have the effect, directly or indirectly, or by implication, of injuring the personal or professional reputation or business of another member of the profession.

1805.0600 KNOWLEDGE OF IMPROPER CONDUCT BY OTHERS.

A licensee who has knowledge or reasonable grounds for believing that another member of the profession has violated any statute or rule regulating the practice of the profession shall have the duty of presenting such information to the board.

A licensee, when questioned concerning any alleged violation on the part of another person by any member or authorized representative of the board commissioned or delegated to conduct an official inquiry, shall neither fail nor refuse to divulge such information as the licensee may have relative thereto.

1805.0700 ACTION BY OTHER JURISDICTION.

Convictions of a felony without restoration of civil rights, or the revocation or suspension of the certificate of licensure of a licensee by another jurisdiction, if for cause which in the state of Minnesota would constitute a violation of law or of these rules, shall be deemed to be a violation of these rules of professional conduct. Any licensee adjudged mentally incompetent by a court of competent jurisdiction shall, until restored to mental competency, be deemed to be incompetent to practice the profession within the meaning of Minnesota Statutes, section 326.11, subdivision 2.

1805.0800 EMPLOYMENT ON THE BASIS OF MERIT.

A licensee as an employer shall refrain from engaging in any discriminatory practice prohibited by law and shall, in the conduct of the business, employ professional personnel solely upon the basis of merit.

1805.0900 MISCONDUCT.

Misconduct within the meaning of Minnesota Statutes, section 326.11, subdivision 1 shall include any act or practice in violation of the rules of professional conduct as set forth in parts 1805.0100 to 1805.0800.

Part G: Affidavit

Read the statements and **sign** and **date** below **in the presence of a notary public**.

- I have read and will comply with the provisions of Minnesota Statutes §§ 326.02 – 326.15 (2014) and the Rules and Regulations adopted thereunder;
- I am not now under any disciplinary proceeding or action, pending or otherwise, in any other jurisdiction;
- I have never been convicted of a felony;
- I have not represented myself as an architect, professional engineer, land surveyor, landscape architect, professional geologist, professional soil scientist, or certified interior designer, without proper licensure or certification, either verbally or on any printed matter, in the State of Minnesota, nor will I do so until such time as my license or certificate has been issued by the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience and Interior Design; and
- I have not performed or offered to perform architectural, professional engineering, land surveying, landscape architectural, professional geological, professional soil scientific, or certified interior designer services, without proper licensure or certification in the State of Minnesota, nor will I do so until such time as my license or certificate has been issued by the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience and Interior Design.

Applicant Signature

Date

Notarization (To be completed by the notary public.)

I, _____, a Notary Public in and for the County of _____, State of _____, do certify that this application was subscribed

and sworn to before me by _____,

on this _____ day of _____, 20_____.

Notary Signature: _____

Seal / Stamp

THIS SECTION FOR BOARD USE ONLY

Application Withdrawn Date

**RECOMMEND DENIAL
OF APPLICATION**

Board Member Signature

Board Member Name

Date

**RECOMMEND APPROVAL
OF APPLICATION**

Board Member Signature

Board Member Name

Date

MINNESOTA BOARD OF ARCHITECTURE, ENGINEERING, LAND SURVEYING,
LANDSCAPE ARCHITECTURE, GEOSCIENCE AND INTERIOR DESIGN

85 East 7th Place, Suite 160, St. Paul, MN 55101-2113
Phone: 651-296-2388 • Fax: 651-297-5310 • mn.gov/aelslagid

EMPLOYMENT HISTORY AND EXPERIENCE FORM PE EXAM

INSTRUCTIONS

Applicant Instructions:

This form serves to document in detail your work experience. **Note that experience requirements vary depending upon the type of degree you earned** (see [MN Rule 1800.2500 Subpart 2a](#)). Also note that qualifying experience is calculated up to the day you submit your application—**not** the PE Exam date.

1. Complete the areas marked **APPLICANT**. Be sure to sign and date the form (see [middle of page 1](#)).
2. When completing the **APPLICANT** fields for the [Description of Work](#) (page 2), be detailed and accurate. Mark the type of experience specific to each work/project description you list.
3. Provide separate copies of this form to each supervisor you listed on [Part E: Record of Employment History](#) of the [PE Exam Application Form](#). Include only the information/hours appropriate to each supervisor. Provide the supervisor(s) with ALL pages of this form, **including this instruction page**.
4. Ask the supervisor(s) to return this form **directly to the Board office** (see address above). You may wish to provide them with a stamped and addressed envelope for this purpose.

Supervisor Instructions:

1. Complete all areas marked **SUPERVISOR**. All are **required**. Be sure to sign and date the form (see [bottom of page 1](#)).
2. For the [Description of Work](#) (page 2) **initial** next to every description you can substantiate. Leave the initial field blank for any description you cannot substantiate.
3. Return the form (pages 1 and 2) **directly to the Board office** (see address above).

If you have questions about this form, please call the Board office at 651-296-2388.

Data Practices Act Warning

The data you furnish on this form will be used by the Board to process your application for licensure. You are not legally required to provide this data; however, if you fail to do so, the Board may be unable to issue your license. Until licensure is granted all application data, except name and designated address, are private data pursuant to Minnesota Statutes section 13.41, subdivision 2 (2014). All data, except social security number, and email address become public record when licensure is granted pursuant to Minnesota Statutes section 13.41, subdivision 5 (2014).

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EMPLOYMENT HISTORY AND EXPERIENCE FORM PE EXAM

Please read the **INSTRUCTIONS** page before completing.

1: General Information and Signatures

APPLICANT: COMPLETE THIS SECTION

Applicant Name _____
(First) (Last)

Applicant Title _____
(Job title at employer listed below)

Engineering Discipline _____
(List the discipline for which you are applying to sit)

Supervisor Name _____

Employer/Company Name _____

Company Address _____

City _____ State _____ Zipcode _____ Country _____

Employment Dates: _____ to _____ Hours worked per week: _____
(MM/DD/YYYY) (MM/DD/YYYY)

Postmark Date: _____
(MM/DD/YYYY)

Provide a date prior to your application
deadline by which you want the supervisor
to return this form to the Board.

APPLICANT'S AUTHORIZATION AND RELEASE – THIS RELEASE MUST BE SIGNED BEFORE SENDING TO SUPERVISOR.

I hereby authorize the Board of AELSLAGID to make inquiries of the person listed as a reference with respect to my experience and employment. I authorize the release of information, favorable or otherwise, **directly** to the Board.

Applicant Signature _____ Date _____

SUPERVISOR: COMPLETE THIS SECTION

The Board requests your cooperation in making its evaluation of the qualifications of the applicant more thorough. All information secured from supervisors/employers is for the use of the Board. In keeping with the [Minnesota Government Data Practices Act](#), the information you provide will be private until the applicant becomes licensed, at which time it will be classified as public information.

Please return this signed and completed form **to the Board** by the postmark date indicated in the box above.

The applicant:

1. Worked under my direct supervision: ☐ Yes ☐ No

2. Performed engineering work in the following area(s):

☐ Administrative ☐ Management ☐ Design ☐ Analytical ☐ Technical ☐ Other (specify) _____

3. Was primarily involved in the following engineering area(s):

☐ Building/Structure ☐ Product ☐ Road/Bridge ☐ Materials and/or Soil Testing/Inspection

☐ Systems Design ☐ Review of Engineering Documents ☐ Other (specify) _____

4. Provided correct employment dates and hours worked per week above: ☐ Yes ☐ No

If **no**, provide correct dates/hours: _____

Supervisor Signature _____ Date _____

2: Description of Work/Projects/Responsibilities

Applicant Name: _____

Supervisor Name: _____

APPLICANT: Use this section to document qualifying experience as defined in [MN Rule 1800.2805](#). Complete all information for each assignment or engagement. The description of work must accurately reflect the character of the work, the degree of responsibility, the location of the work and the client. Mark the type of experience for each description at right (select all types that apply). Attach additional sheets as needed.

SUPERVISOR: Initial next to **every description** you can substantiate in the box on the column at right.



APPLICANT: Describe your work in detail (projects, location/setting, clients, degree of responsibility, skills demonstrated).	APPLICANT: Mark type of experience.*								SUPERVISOR: Initial below.
	D	P	TS	CS	RA	EE	S	OI	

D = Design
P = Planning
TS = Technical Specifications

* Key to Experience Type Codes

CS = Codes and Standards
RA = Research and Analysis

EE = Engineering Economics
S = Safety
OI = Observation and Inspection

MINNESOTA BOARD OF ARCHITECTURE, ENGINEERING, LAND SURVEYING,
LANDSCAPE ARCHITECTURE, GEOSCIENCE AND INTERIOR DESIGN

85 East 7th Place, Suite 160, St. Paul, MN 55101-2113
Phone: 651-296-2388 • Fax: 651-297-5310 • mn.gov/aelslagid

REQUEST FOR WAIVER OF THE FUNDAMENTALS OF ENGINEERING (FE) EXAM WHILE CONCURRENTLY APPLYING TO TAKE THE PE EXAM

The information below is relevant only to PE applicants who wish to request waiver from the FE Exam requirement.
Refer to [MN Rules 1800.2600](#) and [1800.2800](#) on Board website, mn.gov/aelslagid, for additional information.

Step 1:

- See [MN Rule 1800.2800](#) for FE waiver eligibility requirements.
- Complete the entire PE Exam Application.
- On [Part C](#) of the PE Exam Application, select “No” for question 1 and write “Request FE Exam Waiver” in the box under “Engineer-in-Training/EIT #.”

Step 2:

Submit the following along with your completed PE Exam Application:

- Two exhibits of engineering work that include calculations, as stated in [MN Rule 1800.2600](#);
- A letter to the Board from the applicant’s employer verifying the degree of involvement and responsibility displayed by the applicant in the conduct of the project exhibited, as stated in [MN Rule 1800.2600](#); and
- This Waiver Request Form indicating below if you want your exhibits returned once the waiver process is completed. **Choose either:**

I want my exhibits returned. I have enclosed a postage-paid envelope or will provide the Board with a FedEx or UPS account number. I understand that if I do not provide one of these means, my exhibits will be destroyed. I understand that no other means of postage payment (for example: cash, check, or credit card) will be accepted.

OR

I do NOT want my exhibits returned and have signed and dated the release below.

I, _____, authorize the Minnesota Board of AELSLAGID to
(Applicant Name, Printed)
shred the exhibits that I submitted for my FE Exam Waiver Oral Interview.

Applicant Signature

**It is in your best interest not to delay submitting the documentation listed in Step 2,
as the PE Exam Application cannot be approved until after the oral interview takes place
and no interview will be schedule until all documentation is received.**

The Board will contact you to arrange a date and time for the oral telephone interview.

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VERIFICATION OF EXAMINATION AND/OR LICENSURE

TO BE COMPLETED BY APPLICANT

Complete **Section A** and send a signed copy of this form to **all** states in which you have been licensed. **Check with those states regarding fees or other filing requirements**, as failure to do so may delay their processing of this form.

Section A: Contact Information and Applicant Authorization

TO: (Address of state board completing form)

Name _____
(First) (M.I.) (Last) (Suffix)

SS # _____ Former Name _____
(if applicable)

Address _____

City _____ State _____ Zip _____

I am applying to the Minnesota Board of AELSLAGID. I authorize the Verifying Board to provide any and all pertinent information requested.

Applicant Signature _____

Date _____

TO BE COMPLETED BY VERIFYING BOARD

Complete all relevant items in **Sections B–E** and return to the Minnesota Board at the address above.

Section B: Registrations/Licenses Held by Applicant

Registration	Certificate/License #	Date Issued (mm/dd/yyyy)	Expires (mm/dd/yyyy)
Engineer-in-Training			
Professional Engineer			

Section D: Investigations or Complaints

Has formal disciplinary action ever been taken
against the above-named individual?

If **yes**, attach a detailed
explanation. ☐ Yes ☐ No

Section C: Basis of Registration

(Check box next to applicable basis and provide any details requested.)

☐ **EXAMINATION** (Complete Information applicable to exam type below)

Written Exam	Hours	Exam Date	NCEES	Results
Fundamentals (FE)			Yes No	Pass Fail
Principles/Practice (PE)*			Yes No	Pass Fail

* PE Exam Discipline (if applicable): _____

Other (describe): _____

☐ FE ACCEPTED from the following state: _____

☐ PE ACCEPTED from the following state: _____

☐ COMITY with the following state: _____

Section E: Verifying Board Signature

The information provided herein is correct to
the best of our knowledge.

Signature _____

Title _____

Date _____

Board
Seal

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**AUTHORIZATION TO RELEASE
APPLICANT INFORMATION
TO A THIRD PARTY**

THIS FORM IS NOT REQUIRED

Only complete this optional form if you intend someone other than yourself to contact the Board regarding the status of your application.

Minnesota law prohibits the Board from sharing any information regarding your application (prior to final licensure) with **anyone** other than yourself unless you submit this authorization.

AUTHORIZATION/RELEASE

Applicant data is classified as private or confidential under the Minnesota Data Practices Act. However, **I hereby waive my rights under the Minnesota Data Practice Act** and authorize the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience and Interior Design to provide information contained in my application materials, including any documents, to the following individual:

Provide first and last name of third party who may receive information.

I understand that I am not legally required to sign this form. The purpose of this authorization is to facilitate the processing of my application. This authorization automatically expires one year after this date.

Printed Name of Applicant

Date

Applicant Signature